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Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u></u>		
Case number (if known)	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	Chapter 13		amended filing

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
· Your full name	Bridgett	
	First name	First name
Write the name that is on	F	
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Hoskins	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you		
have used in the last	First name	First name
8 years		
Include your married or	Middle name	Middle name
maiden names.	· · · · · · · · · · · · · · · · · · ·	
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social	XXX - XX	
Security number or federal Individual	OR	OR
Taxpayer Identification number	9 xx - xx-	9 xx - xx-
(ITIN)		

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D	ebtor 1 Bridgett First Name	F Hoskins Middle Name Last Name	Case number (if known)
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		950 Cherry Valley Rd Apt 306 Number Street	Number Street
		Vernon Hills Illinois 60061	
		City State Zip Code	City State Zip Code
		Lake County	County
		•	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to
		notices to you at this mailing address.	this mailing address.
		. 0	
		Number Street	Number Street
		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Bridgett	F.		Case number (if kno	wn)
	First Name	Middle Name	Last Name		
Pa	art 2: Tell the Court Abo	ut Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under		iption of each, see <i>Notice Req</i> ilso, go to the top of page 1 and		. <i>§ 342(b) for Individuals Filing for</i> priate box.
8.	How you will pay the fee	more details about how cashier's check, or mone may pay with a credit ca  I need to pay the fee in Individuals to Pay Your  I request that my fee be judge may, but is not reat the official poverty line to	you may pay. Typically, if you ey order. If your attorney is sard or check with a pre-printer installments. If you choose Filing Fee in Installments (Come waived (You may request quired to, waive your fee, and that applies to your family sing you must fill out the Applic	ou are paying the submitting your p ed address. e this option, sign official Form 103, this option only and may do so only tize and you are u	the clerk's office in your local court for efee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> A).  If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9.	Have you filed for bankruptcy within the last 8 years?	Ves. District District District	When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
10	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	When When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	✓ No. Go to line 1			<i>t You</i> (Form 101A) and file it with

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Debtor 1 Bridgett Hoskins Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Bridgett Hoskins \_ Case number (if known) \_

Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Bridgett First Name	F Middle Name	Hoskins Case	number (if known)
	estions for Reporting Purpose		
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individual No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily	consumer debts? Consum primarily for a personal, fam business debts? Business of investment or through the op	debts are debts that you incurred to obtain peration of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.		ny exempt property is excluded and administrative ute to unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 r \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5	million \$1,000,000,001-\$10 billion 0 million \$10,000,000,001-\$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 r \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5	million \$1,000,000,001-\$10 billion 0 million \$10,000,000,001-\$50 billion
Part 7: Sign Below			
For you	correct.  If I have chosen to file under C of title 11, United States Code under Chapter 7.  If no attorney represents me ar out this document, I have obta I request relief in accordance w I understand making a false sta	hapter 7, I am aware that I ma I understand the relief availand and I did not pay or agree to pa ined and read the notice requirith the chapter of title 11, Unatement, concealing property case can result in fines up to	perjury that the information provided is true and by proceed, if eligible, under Chapter 7, 11,12, or 13 able under each chapter, and I choose to proceed by someone who is not an attorney to help me fill ired by 11 U.S.C. § 342(b). ited States Code, specified in this petition. or obtaining money or property by fraud in \$250,000, or imprisonment for up to 20 years, or
	/s/ Bridgett Hoskins	×	
	Signature of Debtor 1		Signature of Debtor 2
	Executed on 4/9/2018 MM / D	D/YYYY	Executed on

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Debtor 1 Bridgett	F	Hoskins	Case number (if k	rnown)				
First Name	Middle Name	Last Name	_					
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 1	2, or 13 of title 11, United	ave informed the debtor(s) about I States Code, and have explained the so certify that I have delivered to the				
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. §	342(b) and, in a case in w	hich § 707(b)(4)(D) applies, certify that I				
represented by an	have no knowledge afte	have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
attorney, you do not				·				
need to file this page.	/s/ Yisroel Y Mosko	vits	Date	4/9/2018				
	Signature of Attorney	for Debtor		M / DD / YYYY				
	Yisroel Y Moskovits							
	Printed name							
	Semrad Law Firm							
	Firm name							
	10 N. Martingale Road	d						
	Street							
	Suite 400							
	Schaumburg		Illinois	60173				
	City		State	Zip Code				
	Contact phone	3122543191	Email address	imoskovits@semradlaw.com				
			Illinois					
	Bar number		State					

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Fill in this information to identify your case:						
Debtor 1	Bridgett	F	Hoskins			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
	(State)					
Case number						
(If known)						

П	Check if this is an
_	amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$14,361.00
1c. Copy line 63, Total of all property on Schedule A/B	\$14,361.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$20,567.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$105,579.35
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	φ103,379.33 ———————————————————————————————————
Your total liabilities	\$126,146.35
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$1,479.00
Copy your combined monthly income from line 12 of Schedule I	<u> </u>
5. Schedule J: Your Expenses (Official Form 106J)	\$1,477.00
Copy your monthly expenses from line 22, Column A, of Schedule J	Ψ1, -77.00

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Deb	tor 1 Bridgett	F	Hoskins	Case number (if known)						
	First Name	Middle Name	Last Name							
Part	4: Answer These Qu	estions for Administrat	ve and Statistical Records	5						
6. <b>A</b>	re you filing for bankrupt	cy under Chapters 7, 11, o	13?							
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
Ŀ	Yes.									
7. <b>W</b>	/hat kind of debt do you h	nave?								
[			mer debts are those incurred by ill out lines 8-10 for statistical pu	an individual primarily for a personal, rposes. 28 U.S.C. § 159.						
		marily consumer debts. Yo ith your other schedules.	u have nothing to report on this	part of the form. Check this box and su	bmit					
		our Current Monthly Income Form 122B Line 11; OR, Fo	e: Copy your total current month rm 122C-1 Line 14.	ly income from Official	\$547.00					
9.	Copy the following spec	ial categories of claims fro	m Part 4, line 6 of Schedule E	/F:						
	From Part 4 on Schedule	e E/F, copy the following:		Total claim						
	9a. Domestic support obli	gations (Copy line 6a.)		\$0.00						
	9b. Taxes and certain other	er debts you owe the governr	nent. (Copy line 6b.)	\$0.00						
	9c. Claims for death or pe	rsonal injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy	line 6f.)		\$86,840.00						
	9e. Obligations arising our priority claims. (Copy line		r divorce that you did not report	\$0.00						
	9f. Debts to pension or pr	ofit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00						

\$86,840.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	information to identify your	case:			
		E	Hoskins		
Debtor 1	Bridgett First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if fil	ing) First Name	Middle Name	Last Name		
	- I not realite				
	ates Bankruptcy Court for the	: Northern	District of Illinois (State)		
Case num (If known)	ber				
Officia	ll Form 106A/B			_	Check if this is an
-	_	_			amended filing
Sched	dule A/B: Prop	erty			12/1
category v responsibl write your	where you think it fits best. e for supplying correct info name and case number (if	Be as complete and a ormation. If more space known). Answer every	a asset only once. If an asset fits in moccurate as possible. If two married posits needed, attach a separate sheet question.  Or Other Real Estate You Own or	eople are filing together, both to this form. On the top of an	n are equally
1. Do you	No. Go to Part 2	equitable interest in an	y residence, building, land, or simila	r property:	
	Yes. Where is the property?				
		Wh	at is the property? Check all that apply	y. Do not deduct secure	d claims or exemptions. Put
1.1	Street address, if available, o	r other description	Single-family home		cured claims on Schedule D: Claims Secured by Property.
			Duplex or multi-unit building  Condominium or cooperative	Current value of the	Current value of the
			Manufactured or mobile home	entire property?	portion you own?
	Number Street		Land		
	Number Street		Investment property		simple, tenancy by
	City State	Zip Code	Timeshare Other	the entireties, or a	ife estate), if known.
		Wh on	o has an interest in the property? Ch		community property s)
			Debtor 1 only	ш	
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
			ner information you wish to add abou perty identification number:	it tills itelli, such as local	
If you	own or have more than one,				
1.2			at is the property? Check all that apply Single-family home	the amount of any se	d claims or exemptions. Put cured claims on <i>Schedule D:</i>
	Street address, if available, o	r other description	Duplex or multi-unit building		Claims Secured by Property.
			Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
			Manufactured or mobile home		
	Number Street		Land Investment property	Describe the nature	
			Timeshare		e simple, tenancy by ife estate), if known.
	City State	Zip Code	Other		
		<b>W</b> h	o has an interest in the property? Ch		community property s)
			Debtor 1 only		
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
			ner information you wish to add abou perty identification number:	it this item, such as local	

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Debtor 1	Bridgett First Name	F Middle Name	Hoskins Last Name	Case number (if known)		
	riist ivaille					
1.3 Stre	et address, if available, or oth		Vhat is the property? Check all that app  Single-family home	the amount of a	any secur	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.
			Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	Current value entire property	of the	Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other	interest (such	as fee si	your ownership mple, tenancy by estate), if known.
,	Julio	М С С С	Who has an interest in the property? Concept Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor information you wish to add about the debtor and another Debtor information you wish to add about Debtor 2 only Debtor information you wish to add about Debtor 2 only Debtor information you wish to add about Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 9 on	Check one. (see instru		mmunity property
	the dollar value of the por we attached for Part 1. Wr	tion you own for a	roperty identification number: all of your entries from Part 1, includir ere. 	ng any entries for pages		
	Describe Your Vehicle		in any vehicles, whether they are rec	sistered or not? Include any v	vehicles	
you own th		ou lease a vehicle, a	also report it on Schedule G: Executory C			
□ No	-,,,	, ,	•			
Yes	2					
3.1	Make Model: Year:	Chevy Trax 2016	Who has an interest in the proper one.  Debtor 1 only	the amount of	any secu	claims or exemptions. Put ared claims on Schedule D: nims Secured by Property.
	Approximate mileage: Other information: 2016 Chevy Trax		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a	Current value entire propert \$9061.00		Current value of the portion you own? \$9061.00
			Check if this is community pro instructions)	perty (see		
3.2	Make Model: Year:		Who has an interest in the proper one.  Debtor 1 only	the amount of	any secu	claims or exemptions. Put ared claims on <i>Schedule D:</i> nims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only	Current value entire propert		Current value of the portion you own?
			At least one of the debtors and a  Check if this is community proinstructions)			

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Debtor 1	Bridgett First Name	F Middle Name	Hoskins Last Name	Case numbe	r (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions)	nly rs and another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o		the amount of any secu	claims or exemptions. Put used claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
		•	At least one of the debto Check if this is commu instructions)  recreational vehicles, othe ishing vessels, snowmobiles,	nity property (see		
4.1	Make Model: Year: Approximate mileage: Other information:	<u></u>	Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions)	nly rs and another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: nims Secured by Property.  Current value of the portion you own?
4.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communinstructions)	nly rs and another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: nims Secured by Property.  Current value of the portion you own?
	-	-	of your entries from Part 2,		1 %0	061.00

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Debtor 1 Bridgett Hoskins Case number (if known) First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... sofa, cocktail table, accent chair, bed and mattress \$1000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... tvs. cellphone \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... used clothing \$2000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3500.00 for Part 3. Write that number here ......

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Hoskins Debtor 1 Bridgett Case number (if known) First Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$500.00 17.1. Checking account: Bank of America 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Debt	tor 1 Bridgett	<u> </u>	Hoskins	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments i	orate bonds and other negotiab nclude personal checks, cashiers' ents are those you cannot transfer	checks, promissory not	tes, and money orders.	
	Yes. Give specific information about them	Issuer name:			
21.	Retirement or pension Examples: Interests in IF		, thrift savings accounts	, or other pension or profit-sharing plans	
	<b>✓</b> No	<b>-</b> .			
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
	,	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:	-		
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	✓ Yes	Electric:			
	_	Gas:			
		Heating oil:			
		Security deposit on rental unit:	deposit with landlord		\$1300.00
		Prepaid rent:			·
		Telephone:	. <u> </u>		
		Water:			
		Rented furniture:			<u> </u>
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No  Yes	Issuer name and description:			

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Debt	or 1 Bridgett	F	Hoskins	Case number (if known)	
24.	First Name  Interests in an e	Middle Nam		der a qualified state tuition program.	
		(b)(1), 529A(b), and 529(b)(	1).		
	Yes	stitution name and descriptio	n. Separately file the records of any inter	ests.11 U.S.C. § 521(c):	
25.	Trusts, equitable exercisable for y		perty (other than anything listed in lir	ne 1), and rights or powers	
	<b>✓</b> No				
	Yes. Describe	)			
26.			crets, and other intellectual property		
		et domain names, websites, p	proceeds from royalties and licensing ag	reements	
	✓ No  Yes. Describe	)			
27.		ises, and other general int g permits, exclusive licenses	tangibles , cooperative association holdings, liquo	r licenses, professional licenses	
	No No				
	Yes. Describe	)			
Mon	ney or property	owed to you?			Current value of the portion you own?
	Tax refunds owed				portion you own? Do not deduct secured
	Tax refunds owed  ✓ No  ☐ Yes. Give spec	I to you		Federal:	portion you own? Do not deduct secured
	Tax refunds owed  No Yes. Give sper about th you alrea	ito you  cific information em, including whether ady filed the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed  No Yes. Give speciabout the you alread and the second	I to you  cific information em, including whether			portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds owed  No Yes. Give spee about th you alrea and the	cific information em, including whether ady filed the returns tax years	usal support, child support, maintenanc	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed  No Yes. Give speciabout the you alreated and the second the second to the second t	cific information em, including whether ady filed the returns tax years	usal support, child support, maintenanc	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed  No Yes. Give speciabout the you alreated and the second the second to the second t	cific information em, including whether ady filed the returns tax years	usal support, child support, maintenanc	State:  Local:  e, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed  No Yes. Give speciabout the you alreated and the second the second to the second t	cific information em, including whether ady filed the returns tax years	usal support, child support, maintenanc	State: Local: e, divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds owed  No Yes. Give speciabout the you alreated and the second the second to the second t	cific information em, including whether ady filed the returns tax years	usal support, child support, maintenanc	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds owed  No Yes. Give speciabout the you alreated and the second the second to the second t	cific information em, including whether ady filed the returns tax years	usal support, child support, maintenanc	State: Local:  e, divorce settlement, property settlemen  Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
28.	Tax refunds owed  No Yes. Give speciabout the you alreated and the second the second to the second t	cific information em, including whether ady filed the returns tax years	usal support, child support, maintenance	State: Local:  e, divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed  No Yes. Give speciabout the you alreated and the second the second text of the second text	cific information em, including whether ady filed the returns tax years e or lump sum alimony, spo cific information		State: Local:  e, divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed  ✓ No  Yes. Give speciabout the you alreated and the second the second to the seco	cific information em, including whether ady filed the returns tax years e or lump sum alimony, spo cific information	payments, disability benefits, sick pay, va	State: Local:  e, divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb <sup>1</sup>	tor 1 Bridgett	F	Hoskins	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance pol Examples: Health, disability,		ings account (HSA); credit, h	nomeowner's, or renter's insurance	
	Yes. Name the insurance of each policy and list it	ce company	pany name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property the street of the s	a living trust, expect proceed		ry, or are currently entitled to receive	
33.	Claims against third parti Examples: Accidents, emplo			a demand for payment	
34.	Other contingent and unl to set off claims  No Yes. Describe	iquidated claims of every	nature, including counter	claims of the debtor and rights	
35.	Any financial assets you o	lid not already list			
36.		-	4, including any entries fo	or pages you have attached ▶	\$1800.00
Part	5: Describe Any Busin	ness-Related Property	You Own or Have an I	nterest In. List any real estate in Par	t 1.
37.	No. Go to Part 6.  Yes. Go to line 38.	egal or equitable interest	in any business-related pr		Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or co	ommissions you already e	arned		or oxomptone
39.	Office equipment, furnish Examples: Business-related  No Yes. Describe		ems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, elec	stronic devices

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Deb	tor 1 Bridgett	F	Hoskins	Case number (if known)	
	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, ed	quipment, supplies you us	e in business, and tools of	your trade	
	<b>✓</b> No				
	_				7
	Yes. Describe				
					]
41.	Inventory				
	<b>✓</b> No				
					7
	Yes. Describe				
40					
42.	Interests in partnershi	ps or joint ventures			
	✓ No				
	Yes. Give specific	Na	ame of entity:	% of ownership:	
	information about				
	them	_			<del>-</del>
		_			
		_			
43. (	Customer lists, mailing	lists, or other compilation	IS		
	<b>√</b> No				
		al al.a a. a a. a. ll ; al.a. a. £;£; a. la. la.	:f	11100 6 101/41 8//0	
	Yes. Do your lists in	clude personally identifiable	information (as defined in 11	1 U.S.C. § 101(41A))?	
	☐ No				
	Yes. Descri	be			<del></del>
44.	Any business-related p	property you did not alread	dy list		
	<b>√</b> No				
	Yes. Give specific	_			<del></del>
	information				
		_			<u> </u>
		_			<u> </u>
		_			
		_			
45. A	dd the dollar value of al	II of your entries from Part	t 5, including any entries fo	or pages you have attached	
		_			
<u> </u>					
Part				ty You Own or Have an Interest In.	
	If you own or have an	interest in farmland, list it in P	art 1.		
46.	Do vou own or have ar	ny legal or equitable inter	est in any farm- or comme	rcial fishing-related property?	
		,		3	Current value of the
	No. Go to Part 7.				portion you own?
	Yes. Go to line 47.				Do not deduct secured claims
					or exemptions
47.	Farm animals				
	Examples: Livestock, po	oultry, farm-raised fish			
	· / · · · · · · · · · · · · · · · · · ·				
	□ No				
	<b>✓</b> No				,
	□ No				]
	<b>✓</b> No				

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Debt	or 1 Bridgett First Name		Hoskins Last Name	Case number (if known)	
48.	Crops-either growing		and the state of t		
	<b>✓</b> No				
	Yes. Describe				
49.	Farm and fishing equi	pment, implements, machinery, fixture	es, and tools of trade		
	<b>✓</b> No				
	Yes. Describe				
50.	Farm and fishing supp	lies, chemicals, and feed			
	✓ No				
	Yes. Describe				
51.		rcial fishing-related property you did	not already list		
	✓ No  Yes. Describe				
	Ш				
				Γ	
		II of your entries from Part 6, including			
<b>&gt;</b>				L	
Part 7	7: Describe All Pro	perty You Own or Have an Intere	est in That You Did Not	List Above	
53.	Do you have other pro	perty of any kind you did not already l			
		ts, country club membership			
	✓ No  Yes. Give specific				
	information				
				,	
54. A	dd the dollar value of a	II of your entries from Part 7. Write the	at number here		
Part 8	List the Totals of	f Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate	e, line 2		<b></b>	
56. <b>p</b>	eart 2 total vehicles, lin	ne 5	\$9061.00		
57. <b>P</b>	art 3: Total personal a	nd household items, line 15	\$3500.00		
58. <b>P</b>	art 4: Total financial as	ssets, line 36	\$1800.00		
59. <b>F</b>	Part 5: Total business-r	elated property, line 45			
60. <b>F</b>	Part 6: Total farm- and	fishing-related property, line 52			
61. <b>F</b>	Part 7: Total other prop	erty not listed, line 54			
62. <b>T</b>	otal personal property	Add lines 56 through 61.	\$14361.00		+ \$14361.00
				Copy personal property total	
60 -	atol of all warmanter of	Pahadula A/D Add Bas 55 - Bas 00			\$14361.00
o3.10	otal of all property on S	Schedule A/B. Add line 55 + line 62			

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			D	ocumer	nt Page 2	U OT 73	
Fill in	n this infor	mation to identify your c	case:				
Deb	tor 1	Bridgett	F		loskins		
Dob	tor O	First Name	Middle Name	L	ast Name		
	tor 2 use, if filing)	First Name	Middle Name	L	ast Name		
Unit	ed States E	Bankruptcy Court for the:	Northern	District	of Illinois		
	e number				(State)		
(If kno	own)						Check if this is an
Of	ficial	Form 106C					amended filing
Sc	hedul	e C: The Prop	erty You Clain	n as E	xempt		04/16
as ex addi:	kempt. If the tional page each iter	more space is needed ges, write your name a m of property you cla	l, fill out and attach to tand case number (if kn nim as exempt, you m	this page own). ust speci	as many copies	of <i>Part 2: Additiona</i> f the exemption yo	ource, list the property that you claim all Page as necessary. On the top of any u claim. One way of doing so is to f the property being exempted up to
unde your	er a law t exempt	that limits the exemp ion would be limited	otion to a particular do to the applicable stat	ollar amo	ount and the valu		ption of 100% of fair market value s determined to exceed that amount,
		tify the Property You					
1.			claiming? Check one on				
	_		ederal nonbankruptcy ex		. 11 U.S.C. § 522(I	0)(3)	
	_		emptions. 11 U.S.C. § 52			a.P. a. Kada	
2.	For any p	roperty you list on Sche	edule A/B that you claim	as exemp	t, till in the inform	ation below.	
		cription of the property chedule A/B that lists th		ı	ount of the exemp	-	Specific laws that allow exemption
			Copy the value f Schedule A/B	rom			
		rity deposit on Il unit, deposit with	\$1,300.00	- <b>V</b>		I,300.00 ket value, up to any ary limit	735 ILCS 5/12-1001(b)
	Line from Schedule	A/B: 22				,	
	Brief description	··	\$500.00				735 ILCS 5/12-1001(b)
	•	king account, Bank		- <b>-</b>	·	5500.00	_
	Line from	nerica			100% of fair mark applicable statute	ket value, up to any ory limit	
-	Schedule	A/B: <u>17</u>					
3.	(Subject to		xemption of more than \$ and every 3 years after tha		filed on or after the	date of adjustment.)	
		Did you acquire the prope	erty covered by the exempt	ion within	1,215 days before y	ou filed this case?	

No Yes

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Debtor 1 Bridgett Hoskins Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$2,000.00 description: **✓** \$2,000.00 used clothing 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 11 Brief 735 ILCS 5/12-1001(b) \$500.00 description: **✓** \$500.00 tvs, cellphone 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) description: \$1,000.00 **✓** \$1,000.00 sofa, cocktail table, 100% of fair market value, up to any accent chair, bed and mattress applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1001(c); 735 ILCS \$9.061.00 description: 5/12-1001(b) \$0 Chevy Trax, 2016, 2016

100% of fair market value, up to any

applicable statutory limit

**Chevy Trax** 

03

Line from

Schedule A/B:

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		Du	cument Page 22 01	13		
Fill in this inf	formation to identify your ca	ase:				
Debtor 1	Bridgett	F	Hoskins			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	) First Name	Mialalla Niana	Look Nove o			
(opodoc, ii iiiiig	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	Northern	District of Illinois			
Case numbe	er		(State)			
Officia	l Form 106D			1		Check if this is ar amended filing
Sched	lule D: Credite	ors Who Ha	ve Claims Secure	ed by Prop	erty	12/1
more space			e are filing together, both are equ nber the entries, and attach it to t			
	y creditors have claims s	ecured by your proper	tv?			
-	•		vith your other schedules. You hav	ve nothing else to repo	ort on this form.	
	es. Fill in all of the information		•	3 1		
	st All Secured Claims					
separ	t 2. As much as possible, list	han one creditor has a par	sured claim, list the creditor ticular claim, list the other creditors order according to the creditor's	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports	Column C Unsecured portion If any
2.1 Santa	nder Consumer USA			\$20,567.00	this claim \$9,061.00	\$11,506.00
Credito	or's Name		that secures the claim:	Ψ20,307.00	Ψ9,001.00	<u>\$11,500.0</u> 0
	Box 961245 mber Street	074 Automobile	, the claim is: Check all that apply.			
	Abel Marin	Contingent	, the claim is shook an that apply.			
Fort \	Worth TX 76161	Unliquidated				
City	State ZIP Code	Disputed				
	owes the debt? Check one. Debtor 1 only	Nature of lien. Check a	all that apply.			
	Debtor 2 only		made (such as mortgage or secured			
	ebtor 1 and Debtor 2 only	car loan)				
	at least one of the debtors		as tax lien, mechanic's lien)			
	nd another	Judgment lien from				
	Check if this claim relates o a community debt	Other (including a ri	ght to offset)			
Date incur	debt was 9/2016 red	Last 4 digits of accou	nt number1000			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$20,567.00

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Filli	n this infor	mation to identify your c	ase:					
Deb	otor 1	Bridgett First Name	F Middle Name	Hoskins Last Name				
Dah	otor 2	riist name	Middle Name	Last Name				
	use, if filing)	First Name	Middle Name	Last Name				
Unit	ted States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Cas (If kn	e number <sub>own)</sub>			. ,				
Of	ficial F	orm 106E/F				Ch	eck if this is ar	n amended filing
Sc	chedu	ule E/F: Cre	ditors Who	<b>Have Unse</b>	cured Claims			12/15
othe Forn clair	r party to a n 106A/B) a ns that are entries in t vn).	any executory contracts and on Schedule G: Exe e listed in Schedule D: C	s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pa	could result in a claim. expired Leases (Official Secured by Property. It	ns and Part 2 for creditors wit Also list executory contracts Form 106G). Do not include a more space is needed, copy top of any additional pages, v	on Sched ny credito the Part y	ule A/B: Propressive of the second se	perty (Official ally secured it out, number
1.	Do any c	reditors have priority un	secured claims against y	ou?				
	<b>✓</b> No. (	Go to Part 2.						
	Yes.							
2.	listed, idea As much Continuat	ntify what type of claim it as possible, list the claims tion Page of Part 1. If mor	is. If a claim has both priorit in alphabetical order accord e than one creditor holds a	ty and nonpriority amount ding to the creditor's nam- particular claim, list the otl		both priorit	y and nonprio	rity amounts.
	(For an ex	planation of each type of	claim, see the instructions t	for this form in the instruc	tion booklet.)	Total	Driority	Nonpriority

claim

amount

amount

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Debto	or 1 Bridgett F		Hoskins Last Name	Case number (if known)	
Part 2		liddle Name TY Unsecured Clai			
3. [	o any creditors have nonpriority un  No. You have nothing to report in  Yes.	secured claims again	st you?	court with your other schedules.	
L I	nsecured claim, list the creditor separa	tely for each claim. For	each claim lis	of the creditor who holds each claim. If a creditor has more ted, identify what type of claim it is. Do not list claims already in art 3.If you have more than four priority unsecured claims fill out	cluded in Part 1.
					Total claim
4.1	AFNI Nonpriority Creditor's Name		L	ast 4 digits of account number	\$294.76
	1310 Martin Luther kIng Drive		v	When was the debt incurred?n/a	
	Number Street		A	As of the date you file, the claim is: Check all that apply.	
	PO BOX 3517		<del></del> [	Contingent	
	Bloomington Illinois	61702		Unliquidated	
	City State  Who incurred the debt? Check one	Zip Code	L	Disputed	
	Debtor 1 only	•	1	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Ļ	Student loans	
	Debtor 1 and Debtor 2 only		L	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and a	nother	[	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a	a community debt	Į.	✓ Other. Specify unseucred	
	Is the claim subject to offset?			_	
	✓ No				
	Yes				
4.2	Bankcard Service Nonpriority Creditor's Name		ι	ast 4 digits of account number	\$2,017.12
	PO Box 4477 Number Street		v	When was the debt incurred?n/a	
	Trained Subst		4	As of the date you file, the claim is: Check all that apply.	
			[	Contingent	
	Beaverton Oregon City State	97076 Zip Code	<u> </u>	Unliquidated Disputed	
	Who incurred the debt? Check one	•	L		
	Debtor 1 only			Student loans	
	Debtor 2 only		ļ	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only			divorce that you did not report as priority claims	
	At least one of the debtors and a		L	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a	a community debt	[	Other. Specify unsecured	
	Is the claim subject to offset?  No				
	Yes				
4.3	Brightwater Capital LLC			ant 4 digita of account number	\$0.00
	Nonpriority Creditor's Name 850 Concourse Parkway South			ast 4 digits of account number When was the debt incurred? n/a	
	Number Street		<del></del>		
	Suite 120		´	As of the date you file, the claim is: Check all that apply.  Contingent	
	Maitland	20751	Ĭ	Unliquidated	
	Maitland Florida City State	32751 Zip Code	i	Disputed	
	Who incurred the debt? Check one Debtor 1 only		1		
	Debtor 2 only		[	Student loans	
	Debtor 1 and Debtor 2 only		Ī	Obligations arising out of a separation agreement or	
	At least one of the debtors and a	nother	Г	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a		-	debts	
	Is the claim subject to offset?	. Johnmanney acot	Ŀ	Other. Specify unsecured	
	✓ No				
Offic	Yes 106E/F	Schedule E/	F: Creditors	Who Have Unsecured Claims	page 2

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 Debtor 1
 Bridgett First Name
 F
 Hoskins
 Case number (if known)

 Last Name
 Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	on Page	
	After listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
4.4	CAPITALONE Nonpriority Creditor's Name c/o Pollack & Rosen, P.C Number Street	Last 4 digits of account number 2714 When was the debt incurred? 4/2015  As of the date you file, the claim is: Check all that apply.	\$1,579.00
	Kennesaw Georgia 30144 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard	
4.5	CAPITALONE Nonpriority Creditor's Name c/o Pollack & Rosen, P.C Number Street  1825 Barrett Lakes Blvd Suite 510  Kennesaw Georgia 30144 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  Yes	When was the debt incurred? 11/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	\$1,215.00
4.6	CCS/FIRST NATIONAL BAN Nonpriority Creditor's Name 500 E 60TH ST N Number Street  SIOUX FALLS South Dakota 57104 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  Yes	When was the debt incurred? 11/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	\$738.00

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Debtor 1 Bridgett F Hoskins Case number (it known)

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.7 Chase Bank Last 4 digits of account number \$500.00

	After listing any entries on this page, number them beginning with	1 4.5, followed by 4.6, and so forth.	Total claim
4.7	Chase Bank Nonpriority Creditor's Name P.O. Box 659732 Number Street	Last 4 digits of account number When was the debt incurred?	\$500.00
	San Antonio Texas 78265 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify unseucred	
4.8	Citibank Nonpriority Creditor's Name	Last 4 digits of account number 9101	\$0.00
	Number Street c/0 Blitt and Gaines P.C.  Wheeling Illinois 60090 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes	When was the debt incurred?	
4.9	Comcast Nonpriority Creditor's Name 1255 W. North Ave Number Street	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent	\$400.00
	Chicago Illinois 60622 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes	Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify unsecured	

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Debtor 1 Bridgett Hoskins Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 COMENITYBANK/MARATHON \$1,131.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7/2015 PO BOX 182789 Number Street As of the date you file, the claim is: Check all that apply. Contingent **COLUMBUS** 43218 Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.11 COMENITYBANK/NY&CO \$918.00 Last 4 digits of account number Nonpriority Creditor's Name 220 W SCHROCK RD When was the debt incurred? 6/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent WESTERVILLE Ohio 43081 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.12 COMENITYCB/HSN \$651.00 Last 4 digits of account number 8705 Nonpriority Creditor's Name When was the debt incurred? 9/2015 995 W 122ND AVE Number As of the date you file, the claim is: Check all that apply. Contingent 80234 WESTMINSTER Colorado Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset?

No Yes

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 CREDIT FIRST N A \$507.00 Last 4 digits of account number Nonpriority Creditor's Name 6275 EASTLAND RD When was the debt incurred? 4/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **BROOKPARK** 44142 Ohio Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.14 CREDIT ONE BANK NA \$614.00 3409 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 98875 When was the debt incurred? 11/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS Nevada 89193 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.15 DEPT OF ED/NAVIENT \$86,840.00 Last 4 digits of account number 1022 Nonpriority Creditor's Name When was the debt incurred? 10/2013 PO BOX 9635 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

No Yes

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Debtor 1 Bridgett Hoskins Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim DIVERSIFIED CONSULTANT** 4.16 \$1,367.00 0842 Last 4 digits of account number Nonpriority Creditor's Name 10550 DEERWOOD PARK BLVD When was the debt incurred? 4/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: SPRINT **✓** No Yes 4.17 ENHANCED RECOVERY CO L \$318.00 5769 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 10/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? |✓| ORIGINAL CREDITOR: AT T U-**✓** No Other. Specify **VERSE** Yes 4.18 **ERC** \$340.80 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 23870 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 32241 Jacksonville Florida City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt

**✓** No

Is the claim subject to offset?

Other. Specify

unsecured

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 \$0.00 - Last 4 digits of account number 0114 Nonpriority Creditor's Name When was the debt incurred? 12/2015 3175 Commercial Ave Number Street As of the date you file, the claim is: Check all that apply. Ste 201 Contingent Northbrook 60062 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? Yes 4.20 FIFTH THIRD BANK \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 38 FOUNTAIN SQUARE PLZ When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CINCINNATI Ohio 45263 Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ unsecured Is the claim subject to offset? **✓** No Yes Illinois Department of Unemployment \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4519 W Main St Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Belleville Illinois 62226 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ unsecured

No Yes

Is the claim subject to offset?

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 KOHLS/CAPONE \$695.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2012 PO BOX 3115 Number Street As of the date you file, the claim is: Check all that apply. Contingent MILWAUKEE 53201 Wisconsin Unliquidated State City 7ip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.23 MERRICK BANK CORP \$1,388.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9201 When was the debt incurred? 7/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent OLD BETHPAGE New York 11804 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.24 Nicor Gas \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 0632 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60507 Illinois Aurora City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify unsecured

✓ No Yes

Is the claim subject to offset?

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 NORDSTROM/TD BANK USA \$1,861.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7/2015 PO BOX 6555 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **ENGLEWOOD** 80155 Colorado City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_ CreditCard Is the claim subject to offset? No ◪ ☐ Yes SYNCB/CARE CREDIT \$59.00 Last 4 digits of account number \_ 2650 Nonpriority Creditor's Name When was the debt incurred? 2/2017 950 FORRER BLVD Street Number As of the date you file, the claim is: Check all that apply. Contingent KETTERING Ohio 45420 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes SYNCB/TJX COS \$263.00 Last 4 digits of account number 2306 Nonpriority Creditor's Name When was the debt incurred? 3/2016 PO BOX 965005 Number As of the date you file, the claim is: Check all that apply. Contingent ORLANDO 32896 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.28 TD BANK USA \$521.67 - Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 33 N Dearborn Number Street As of the date you file, the claim is: Check all that apply. #1301 Contingent Unliquidated 60602 Illinois Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ 2015m4000291 Is the claim subject to offset? No ◪ Yes TD BANK USA/TARGETCRED \$521.00 Last 4 digits of account number 9227 Nonpriority Creditor's Name When was the debt incurred? 11/2012 PO BOX 673 Street Number As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS 55440 Minnesota Unliquidated Citv State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.30 **TMobile** \$340.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 742596 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Ohio 45274 Cincinnati City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ unscured Is the claim subject to offset? No

Yes

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Westlake Hospital 4.31 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 830913 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 35283 Birmingham Alabama City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_ unsecured Is the claim subject to offset? No  $\overline{\phantom{a}}$ Yes Westwood College \$0.00 Last 4 digits of account number 3911 Nonpriority Creditor's Name When was the debt incurred? 5/2007 7604 TECHNOLOGY WAY S-40 Number Street As of the date you file, the claim is: Check all that apply. Contingent 80237 **DENVER** Colorado Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No

Yes

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 Debtor 1
 Bridgett First Name
 F
 Hoskins
 Case number (if known)

 First Name
 Middle Name
 Last Name

#### Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$86,840.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$18,739.35 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$105,579.35 6j. Total. Add lines 6f through 6i.

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Fill in this information to identify your case:					
Debtor 1	Bridgett	F	Hoskins		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number (If known)	_		(State)		

#### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or compa	any with whom you have	the contract or lease	State what the contract or lease is for
2.1	Pebbleshire II Associates Name 840 Cherry Valley Rd			Residential Lease, Debtor is Lessee, residential lease
	Number Street			
	Vernon Hills	Illinois	60061	
	City	State	Zip Code	

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			Do	cument Page 3	7 of 73
Fill in th	nis infor	mation to identify your c	ase:		
Debtor	1	Bridgett	F Middle Name	Hoskins	
Debtor (Spouse,		First Name		Last Name	
(Spouse,	ii iiiiig)	First Name	Middle Name	Last Name	
United	States E	Sankruptcy Court for the:	Northern	District of Illinois (State)	_
Case n				(State)	
	•	Form 106H			Check if this is an amended filing
Sche	edul	e H: Your Co	lebtors		12/15
1.	Do you No Ye Within t Californi	he last 8 years, have yo a, Idaho, Louisiana, Neva b. Go to line 3. ss. Did your spouse, for No	ou lived in a community p da, New Mexico, Puerto Ri mer spouse, or legal equi	co, Texas, Washington, and V	Community property states and territories include Arizona, Visconsin.)
		Name of your spouse, f	ormer spouse, or legal equ	ivalent	_
		Number Street			_
		City	State	Zip Code	_
:	again a	s a codebtor only if tha	t person is a guarantor o	r cosigner. Make sure you h	your spouse is filing with you. List the person shown in line 2 ave listed the creditor on Schedule D (Official Form 106D), dule D, Schedule E/F, or Schedule G to fill out Column 2.
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the debt
					Chack all ashedules that apply:

Schedule D, line

Schedule G, line

**✓** 

Schedule E/F, line 4.17

60061

Zip Code

Levy, Shelton

950 Cherry Valley Rd

Illinois

State

Street

Name

Number

City

Vernon Hills

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Fill in this	s information to identify	your case:						
Debtor 1 Debtor 2	Bridgett First Name	F Middle Name	Hoskii Last N			Che	ock if this is:	
	First Name	Middle Name	Last N	ame			An amended filing	
United States the: Case number	tes Bankruptcy Court for	Northern	_ District of III	inois State)			A supplement showing post-petition chapter 13 expenses as of the following date:	
(If known)							MM / DD / YYYY	
Officia	al Form 106I							
Sched	lule I: Your In	come					12/15	
spouse. If number (if		l, attach a separate she y question.					not include information about your ional pages, write your name and case	
			Debtor 1				Debtor 2	
If you I attach	Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  In all the part time accounts of the property of the part time accounts.	Employment status  Occupation		Employed  Not Employed			Employed  Not Employed	
	e part time, seasonal, or nployed work.	Employer's name						
	ation may include student nemaker, if it applies.	Employer's address	Number St	reet			Number Street	
		How long ampleyed	City		State	Zip Code	City State Zip Code	
		How long employed there?						
Part 2:	Give Details About N	Nonthly Income						
	e monthly income as of the nless you are separated.	the date you file this forr	<b>n.</b> If you have	nothi	ng to report	for any line, v	write \$0 in the space. Include your non-filing	
	your non-filing spouse hav ace, attach a separate she		combine the	inforr	nation for all	employers fo	or that person on the lines below. If you need	
					For Deb	otor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (befo , calculate what the monthly		2.		\$0.00		
3. Estin	mate and list monthly ove	rtime pay.		3.		+ \$0.00		
4. Calc	ulate gross income. Add I	ine 2 + line 3.		4.		\$0.00		

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Dept	or 1Bridgett First Name		loskins Last Name	Case number known)	(if	
	Tilot Hamo	inidale Name	adt Namo	For Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here		<b>→</b> 4.	\$0.00		
5. <b>Lis</b>	t all payroll ded	uctions:				
5a	. Tax, Medicare,	and Social Security deductions	5a.	\$0.00		
5b	. Mandatory cor	tributions for retirement plans	5b.	\$0.00		
5с	. Voluntary cont	ributions for retirement plans	5c.	\$0.00		
5d	l. Required repay	yments of retirement fund loans	5d.	\$0.00		
5e	. Insurance		5e.	\$0.00		
5f.	Domestic supp	ort obligations	5f.	\$0.00		
5g	. Union dues		5g.	\$0.00		
5h	. Other deduction	ons. Specify:	_ 5h. +	\$0.00 +		
6. <b>Ad</b> +5h.	d the payroll ded	ductions. Add lines 5a + 5b + 5c + 5d + 5e +5f	f + 5g 6.	\$0.00		
7. <b>Ca</b>	Iculate total mo	nthly take-home pay. Subtract line 6 from line	4. 7.	\$0.00		
8. <b>Lis</b>	t all other incon	ne regularly received:				
8a	business, profe	m rental property and from operating a ession, or farm ent for each property and business showing				
		ordinary and necessary business expenses, and		\$0.00		
Ωh	. Interest and di	•	8a. 8b.	\$0.00		
		payments that you, a non-filing spouse, or		φυ.υυ		
	Include alimony	, spousal support, child support, maintenance, nt, and property settlement.	8c.	\$0.00		
8d	. Unemployment		8d.	\$0.00		
8e	. Social Security	,	8e.	\$932.00		
8f.	Include cash ass cash assistance under the Supple housing subsidie Specify:	ent assistance that you regularly receive istance and the value (if known) of any non- that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es e Programs Income	8f.	\$197.0 <u>0</u>		
8g	. Pension or reti	rement income	8g.	\$0.00		
	•	income. Specify: Id Contributions Income	8h. +	\$350.00 +		
9. <b>Ad</b>	d all other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	⊦8h. 9.	\$1,479.00		
		income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp	10. Douse	\$1,479.00 +	=	\$1,479.00
In o	clude contribution ends or relatives.	gular contributions to the expenses that you is from an unmarried partner, members of your amounts already included in lines 2-10 or amounts.	household, your o	lependents, your roomn		
Sp	ecify:	·			11.	+ \$0.00
		n the last column of line 10 to the amount in the Summary of Schedules and Statistical Sum			,	\$1,479.00
13. <b>D</b>	o you expect an	increase or decrease within the year after y	you file this form	?		Combined monthly income
<u> </u>						
	Yes. Explain:					

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		Docu	ment Page 40 of 73	3		
Fill in this infor	mation to identify	your case:				
Debtor 1	Bridgett	F	Hoskins			
	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filir	ng	
United States B	Bankruptcy Court fo	or the: Northern [	District of Illinois		howing post-petition chapter 13	
Case number			(State)	expenses as or	the following date:	
(If known)			_	MM / DD / YYYY	<del></del>	
Official	Form 106	3.1				
-						
Schedul	e J: Your E	-xpenses			12	2/15
information. If		s possible. If two married people ar eded, attach another sheet to this on.				
<u>`</u>	cribe Your Hou					
1. Is this a joi						
✓ No. Go	o to line 2					
Yes. D	oes Debtor 2 live i	in a separate household?				
	No					
i	Yes. Debtor 2 m	nust file Official Forms 106J-2, <i>Expen</i>	ses for Separate Household of Debi	or 2.		
2. Do you hav	e dependents?	No				
	Debtor 1 and	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent live	
Debtor 2.		each dependent	Debtor 1 or Debtor 2 Child	age	with you?	
			Offilia	· -	Yes.	
	penses include					
than	of people other					
yourself an dependent		Yes				
Dort 2: Esti	mate Vour Onge	oing Monthly Expenses				
	_				0	
	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup				
	•	non-cash government assistance ided it on Schedule I: Your Income	-		Your expenses	
	I or home ownershor the ground or lot	hip expenses for your residence. In . 4.	clude first mortgage payments and		<b>\$265.0</b>	00
If not inc	luded in line 4:					
4a. Real e	state taxes				4a <b>\$0.</b> 0	)0

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities:         6.         \$0.00           6. Utilities:         6.         \$2.20           6. Water, sever, garbage collection         6.         \$0.00           6. Crelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           6. Chelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           6. Chelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           6. Chelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           6. Chelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           6. Chelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           6. Chelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           6. Chelephone, oil phone, Internet, satellite, and cable services         6.         \$10.00           7. Coltring, Baudry, and dry cleaning         8.         \$30.00           10. Chelidia and dental services         11.         \$55.00           11. Medical and dental services         12.         \$30.00           12. Characteria, clubs, recreation, newapapers, maga	First Name	Middle Name Last Name		
Section   Sect				Your expenses
6a. Electricity, heat, natural gas	5. Additional mortgage paym	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$110.00           6d. Other, Specify:         7.         \$197.00           7. Food and housekceping supplies         7.         \$197.00           8. Childcare and children's education costs         8.         \$0.00           9. Citothing, laundry, and dry cleaning         9.         \$370.00           10. Personal care products and services         11.         \$80.00           11. Medical and dental expenses         11.         \$80.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$96.00           10. Do not include care payements         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance         15         \$0.00           15a. Life insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Taxes Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           \$psecify:         <	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$11.00           6d. Other. Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$197.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$70.00           10. Personal care products and services         10.         \$60.00           11. Medical and dental expenses         11.         \$50.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$96.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15. Lete insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance         15b.         \$0.00           15. Lete insurance         15c.         \$10.00         \$0.00           15. Lete insurance.         \$15c.         \$10.00         \$0.00	6a. Electricity, heat, natural g	gas	6a.	\$22.00
6d. Other. Specify  6d. Other Specify  7. Food and housekeeping supplies 7. Food and housekeeping supplies 7. Food and housekeeping supplies 7. Signo 7. Signo 7. Signo 8. Childcare and children's education costs 8. So. 00 8. So. 00 10. Personal care products and services 10. Second 7. Signo 7. O.	6b. Water, sewer, garbage of	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$197.00           8. Childcare and childcare's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$70.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$50.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$80.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15s         \$0.00           15. Insurance.         15s         \$0.00           15b. Health insurance educated from your pay or included in lines 4 or 20.         15c         \$10.00           15c. Vehicle insurance. Specify:         15c         \$10.00	6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$110.00
8. Childcare and children's education costs         8. S0.00           9. Clothing, laundry, and dry cleaning         9. \$70.00           10. Personal care products and services         10. \$60.00           11. Medical and dental expenses         11. \$50.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments         12. \$96.00           14. Charitable contributions and religious donations         14. \$0.00           15. Insurance.         15. Insurance           Do not include in insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance         15a. \$0.00           15b. Health insurance         15b. \$0.00         15c. Othic insurance         15c. \$140.00           15c. Vehicle insurance.         15c. Vehicle insurance         15c. \$140.00           15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17c. Cheric. Specify:         17c. \$40.00           17a. Car payments for Vehicle 1         17a. \$467.00           17b. Car payments for Vehicle 2         17b. \$0.00           17c. Other. Specify:         17c. Other. Specify:         17c. Other. Specify:           17d. Other. Specify:         19c. \$0.00           19c.	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning         9. \$70.00           10. Personal care products and services         10. \$60.00           11. Medical and dental expenses         11. \$50.00           12. Transportation. Include gas, maintenance, bus or train fare.         12. \$98.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$0.00           14. Charitable contributions and religious donations         14. \$0.00           15. Insurance.         15. Insurance           Do not include insurance deducted from your pay or included in lines 4 or 20.         155. He insurance         156. \$0.00           150. Life insurance         150. \$0.00         \$0.00           150. Vehicle insurance         150. \$0.00         \$0.00           150. Vehicle insurance.         150. \$0.00         \$0.00           150. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00         \$0.00           170. Installment or lease payments.         170. \$0.00         \$0.00         \$0.00         \$0.00	7. Food and housekeeping su	pplies	7.	\$197.00
10. Personal care products and services       10.       \$60.00         11. Medical and dental expenses       11.       \$50.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$96.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$0.00         15a. Life insurance       15a       \$0.00	8. Childcare and children's e	ducation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$50.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$96.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       13.       \$9.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$0.00         15b. Health insurance       15b. Health insurance       15c. Vehicle insurance       17c. Vehicle insurance       17c. Other. Specify:       17c. Other. Specify:	9. Clothing, laundry, and dry	cleaning	9.	\$70.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$96.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   14.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance.	10. Personal care products a	nd services	10.	\$60.00
Do not included car payments   13.	11. Medical and dental exper	nses	11.	\$50.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       30.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15b. Health insurance       15b. \$0.00       50.00         15c. Vehicle insurance       15c. \$140.00       \$0.00         15c. Vehicle insurance. Specify:       15d. \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         17. Installment or lease payments:       16       \$0.00         17. Installment or lease payments:       17a. \$467.00       \$0.00         17b. Car payments for Vehicle 1       17a. \$467.00       \$0.00         17c. Other. Specify:       17c. \$0.00       \$0.00         17c. Other. Specify:       17c. \$0.00       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19. \$0.00         20a. Mortgages on other property       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insu	-		12.	\$96.00
15. Insurance.	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a   \$0.00     15b. Health insurance   15c   \$140.00     15c. Vehicle insurance   15c   \$140.00     15c. Vehicle insurance. Specify   15d   \$0.00     15d. Other insurance. Specify   15d   \$0.00     15d. Other insurance. Specify   15d   \$0.00     16c   \$0.00     17c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify   16   \$0.00     17c. Installment or lease payments:   17a   \$467.00     17b. Car payments for Vehicle 1   17a   \$467.00     17c. Other. Specify   17c   \$0.00     17c. Other. Specify   17c   \$0.00     17d. Other. Specify   17d   \$0.00     18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.     19. Other payments you make to support others who do not live with you.   Specify   19. \$0.00     20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00     20b. Real estate taxes.   20b   \$0.00     20c. Property, homeowner's, or renter's insurance   20c   \$0.00     20d. Maintenance, repair, and upkeep expenses.   20d   \$0.00	14. Charitable contributions	and religious donations	14.	\$0.00
15b Health insurance   15b   \$0.000   15c. Vehicle insurance   15c   \$140.000   15c. Vehicle insurance   15c   \$140.000   15d. Other insurance. Specify:		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:	15c. Vehicle insurance		15c	\$140.00
Specify:	15d. Other insurance. Speci	fy:	15d	\$0.00
17.   Installment or lease payments:   17a. Car payments for Vehicle 1   17a   \$467.00   17b. Car payments for Vehicle 2   17b   \$0.00   17c. Other. Specify:   17c   \$0.00   17d. Other. Specify:   17d   \$0.00   17d. Other. Specify:   17d   \$0.00   18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.   19. Other payments you make to support others who do not live with you.   19. \$0.00   20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00   20b. Real estate taxes.   20b   \$0.00   20b. Real estate taxes.   20c. Property, homeowner's, or renter's insurance   20d. \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   20d. \$0.00	16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease paym	nents:	10	
17c. Other. Specify: 17d. S0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17a. Car payments for Vehic	cle 1	17a	\$467.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20c \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00				\$0.00
Specify:			18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		e to support others who do not live with you.	10	Ф0.00
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		ses not included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	\$0.00
20b. Real estate taxes.  20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's	s, or renter's insurance		
	20e. Homeowner's associati	ion or condominium dues		

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Debtor 1	Bridget	t	F	Hoskins	Case number (if known)		
	First Na	ime	Middle Name	Last Name			
21.Other	. Speci	ify:				21	\$0.00
	•	our monthly expenses	<b>5.</b>				\$1,477.00
		es 4 through 21.					\$0.00
		, , ,	, · · · ·	, from Official Form 106J-2			\$1,477.00
22c. A	dd line	22a and 22b. The resu	ılt is your monthly exp	penses.		22.	
23.Calcu	late y	our monthly net incom	ie.				
23a. C	opy lir	ne 12 (your combined m	nonthly income) from	Schedule I.		23a	\$1,479.00
23b. C	Сору у	our monthly expenses f	rom line 22 above.			23b	\$1,477.00
		t your monthly expense		ncome.			\$2.00
T	The res	ult is your monthly net	income.			23c	
morto	gage p			loan within the year or do yo modification to the terms of			

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Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Bridgett	F	Hoskins	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Ciaic)	

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and
×	/s/ Bridgett Hoskins	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 4/9/2018	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill	in this in	formation to	dentify your o	case:				
Deb	otor 1	Bridgett		F	Hoskins			
Dak	tor O	First Nan	ne	Middle	Name Last Nam	е		
	otor 2 use, if filing	g) First Nam	ne	Middle	Name Last Nam	e		
Unit	ted State	es Bankruptcy	Court for the:	Northern	District of Illino	is		
Cas	e numb	er			(Stat	e)		
(If kn						_		
Of	ficia	l Form	107					Check if this is a amended filing
				al Δffairs f	or Individuals	Filing for Bankru	intev	04/1
						together, both are equally	<u> </u>	
info	rmatio		ace is need	ed, attach a sep		. On the top of any additio		
a.		-						
Par	t 1: G	ive Details	About Your	Marital Status	and Where You Lived	Before		
1.	What	is your curre	ent marital st	atus?				
		Married						
	<b>✓</b>	Not married						
2.	Durin	o the last 3 v	vears. have v	ou lived anywher	e other than where you li	ve now?		
			, care, mare ,					
		No ∕es Listallof	the places v	ou lived in the las	t 3 years. Do not include v	where you live now		
	<b>Y</b>	100. <u>Liot</u> all 0.	are places y	34 117 04 117 110 140	to yours. Bo not morado	mioro you are now.		
	ı	Debtor 1:			Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
						Same as Debtor 1		Same as Debtor 1
	3	314 Beach Av	9			_		_
	1	Number Street	_		From	Number Street		From
	-				To <u>08/2017</u>			To
		_a Grange Park	Illinois	60526		City State	Zip Code	
	_	City	State	Zip Code				
						Same as Debtor 1		Same as Debtor 1
	=				From			From
	Γ	Number Street			To	Number Street		To
	-							
	(	City	State	Zip Code		City State	Zip Code	
3.	Within	the last 8 ve	are did you e	war live with a sr	ouse or legal equivalent	in a community property sta	te or territory? (Co	nmunity property states
J.		-		-	• •	Puerto Rico, Texas, Washingto	- ,	imamily property states
	✓ No	)						
		s. Make sure	you fill out S	chedule H: Your	Codebtors (Official Form	106H).		

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages. Wages. For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions exclusions) and exclusions) \$788.00 estimated LINK income From January 1 of current year until Est SSI Income \$3,728.00 the date you filed for bankruptcy: estimated LINK income \$2,364.00 For last calendar year: Est SSI Income \$11,184.00 (January 1 to December 31, 2017 estimated LINK income \$2,364.00 For the calendar year before that: Est SSI Income \$11,184.00 (January 1 to December 31, 2016

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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tor 1 B	Bridgett		F	Hos	kins	Case number	(if known)
F	irst Name		Middle Name	Last	Name		
Inside corpor agent,	rs include your rations of which including one as child suppor	relatives; an n you are an for a busine	y general partners officer, director, p ess you operate as	s; relatives of any goerson in control, of	eneral partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? You are a general partner; You securities; and any managing Homestic support obligations,
Ľ	es. List all pay	ments to a	n insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
In	sider's Name						
Νι	umber Street						
Ci	ity	State	Zip Code				
In	sider's Name						
Nu	umber Street						
Ci	ity	State	Zip Code				
inside Include	r? e payments on O	debts guara	or bankruptcy, canteed or cosigne	d by an insider.	Total amount paid	Amount you still owe	n account of a debt that benefited an  Reason for this payment
							Include creditor's name
In	sider's Name						
Νι	umber Street						
Ci	ity	State	Zip Code				
In	sider's Name						
Nu	umber Street						
<u>-</u>	· · ·	Ctota	Zin Co-do				
Ci	ιιγ	State	Zip Code				I I

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title judgment Pending Circuit Court of Cook County, Illinois TD Bank USA v Bridgett Hoskins Court Name On appeal 5600 Old Orchard Road Case number NumberStreet Concluded 2015M4000291 60077 Skokie Illinois City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1	Bridgett First Name	F Middle Name	Hoskins Last Name	Case number (if known)	-	
11.		thin 90 days before you filed fo counts or refuse to make a pay			nk or financial institution, s	set off any amour	its from your
	Ħ	Yes. Fill in the details.					
		1		Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account no	umber: XXXX-		
		011	7'- 0-1-				
		City State	Zip Code				
12.		thin 1 year before you filed for pointed receiver, a custodian,		y of your property in the p	ossession of an assignee fo	r the benefit of c	reditors, a court-
	<b>✓</b>	No					
		Yes					
Part	5:	List Certain Gifts and Con	tributions				
13.	Wi	ithin 2 years before you filed fo	or bankruptcy, did y	ou give any gifts with a to	tal value of more than \$600	per person?	
	<b>∠</b>	No Yes. Fill in the details for eac	h gift.				
		Gifts with a total value of mo	ore than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the	e Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to you					
		Person to Whom You Gave the	e Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to you					

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Debtor 1	Bridgett	F	Hoskins	Case number (if know	vn)	
	First Name	Middle Name	e Last Name			
4. Wi	thin 2 years before you	i filed for bankrupto	cy, did you give any gifts or contribu	itions with a total value	of more than \$600	to any charity?
	No					
✓	l .					
	Yes. Fill in the details	for each gift or con	ntribution.			
	Gifts or contribution	s to charities	Describe what you contr	ibuted	Date you	Value
	that total more than		Describe what you conti	Dutcu	contributed	Talac
	that total more than	4000			Continuation	
	Charity's Name					
	Number Street		<del></del>			
	Number Street					
	0.7.	-t- 7:- OI				
	City Sta	ate Zip Cod	ie			
art 6:	List Certain Losses	3				
gai	mbling?	med for bunkruptoy	y or since you filed for bankruptcy, o	ard you lose unything bec	dusc of their, me,	other disaster, or
✓	No					
	Yes. Fill in the details.					
	Describe the propert	by you lost and	Describe any insurance	noveress for the less	Date of your	Value of property
	how the loss occurre		Include the amount that in		loss	lost
	now the recorded and	, u	pending insurance claims		1000	1001
			A/B: Property.	511 m10 00 01 <i>00110000</i>		
			7.127.7.0pe.ty.			
		enis or Transiers				
6. Wit	out seeking bankruptc	filed for bankruptcy y or preparing a ba	y, did you or anyone else acting on			anyone you consulted
6. Wit	thin 1 year before you to but seeking bankruptc lude any attomeys, bank	filed for bankruptcy y or preparing a ba cruptcy petition prepa	y, did you or anyone else acting on ynkruptcy petition?			anyone you consulted
6. Wit	thin 1 year before you to but seeking bankrupto lude any attorneys, bank	filed for bankruptcy y or preparing a ba cruptcy petition prepa	y, did you or anyone else acting on ynkruptcy petition?			anyone you consulted
6. Wit	thin 1 year before you to but seeking bankruptc lude any attomeys, bank	filed for bankruptcy y or preparing a ba cruptcy petition prepa	y, did you or anyone else acting on ynkruptcy petition? arers, or credit counseling agencies for	services required in your b		anyone you consulted  Amount of
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Debtor	1 Bridgett	F		se number <i>(if known)</i>		
	First Name	Middle Name	Last Name			
h	ithin 1 year before you filed fo elp you deal with your credito o not include any payment or tra	rs or to make payn		alf pay or transfer a	any property to ar	nyone who promised to
·	No Yes. Fill in the details.					
L	Tes. I ili ili ilic detalis.		December and value of any and	a salara	Data	A
			Description and value of any prop transferred	епу	Date payment or transfer was made	Amount of payment
	Person Who Was Paid		-			
	Number Street		-			
			-			
	City State	Zip Code				
	No Yes. Fill in the details.		Description and value of property	Describe any	property or	Date
			transferred		eived or debts pa	transfer was made
	Person Who Received Transf	er	_			
	Number Street		_			
	City State Person's relationship to you	Zip Code	_			
	Person Who Received Transf	er	-			
	Number Street		_			
	City State Person's relationship to you	Zip Code	-			
b	ithin 10 years before you filed eneficiary? hese are often called asset-prote		id you transfer any property to a self-se	ettled trust or simil	lar device of whic	h you are a
<u> </u>	No Yes. Fill in the details.					
L	-		Description and value of the pro	perty transferred		Date transfer was made
	Name of trust					

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Debtor 1 Bridgett Hoskins Case number (if known) Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closing or closed, sold, moved, or transfer transferred Chase Bank Checking XXXX-0000 09/2017 \$ 500.00 Person Who Was Paid Savings P.O. Box 659732 Number Street Money market Brokerage San Antonio 78265 Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code City State Zip Code

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Hoskins Debtor 1 Bridgett Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Deb	tor 1	Bridgett	F		Hoskins	Case r	number <i>(if l</i>	known)		
		First Name	Mic	Idle Name	Last Name					
26.	Hav		/ in any judicial	or administrativ	ve proceeding under	any environmenta	ıl law? Inc	lude settlem	ents and orde	rs.
		No Yes. Fill in the det	ails.							
				Cor	urt or agency		Nature o	f the case		Status of the case
		Case title		Cou	urt Name	_				Pending
		Case number		Nur	nberStreet					On appeal
				City	State	Zip Code				Concluded
Part	11:	Give Details Ab	out Your Bus	iness or Conn	ections to Any Bu	siness				
27.	Wit	hin 4 years before	you filed for bar	nkruptcy, did yo	u own a business or	have any of the fol	llowing co	onnections to	any business?	?
		A member of A partner in a	a limited liability a partnership	y company (LLC	, profession, or other ) or limited liability pa		-time or p	art-time		
				ging executive one voting or equi	of a corporation ty securities of a corp	ooration				
	<b>✓</b>	No. None of the a			ails below for each b	u oino oo				
	Ц	res. Oneck all the	агарру ароче			re of the business	•		entification nuitial Security nu	
		Business Name						EIN:		
		Number Street			Name of accounts	ant or bookkeeper		Dates busin	ess existed	
		City	State	Zip Code	name of account	ant of bookkeeper		From	To	
					Describe the natu	re of the business			entification nuital Security nu	
		Business Name						EIN:		
		Number Street			Name of accounts	ant or bookkeeper		Dates busin	ess existed	
		City	State	Zip Code	Name of accounts	ant of bookkeeper		From	To	
					Describe the natu	re of the business	:		entification nuital Security nu	
		Business Name						EIN:		
		Number Street			Name of accounts	ant or bookkeeper		Dates busin	ess existed	
		City	State	Zip Code	name of accounte	or poorveeher		From	To	

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Deb	otor 1 Bridgett		F	Hoskins	Case number (if known)
	First Name		Middle Name	Last Name	
28.	Within 2 year creditors, or		or bankruptcy, did y	ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	Yes. Fill in	n the details below.			
	_			Date issued	
	Name			MM/DD/YYYY	
	Number	Street		_	
	City	State	Zip Code	_	
Pari	t 12: Sign Be	elow			
1	true and corre	ct. I understand tha ase can result in fi	at making a false sta nes up to \$250,000,	tement, concealing prope	ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debte			Signature of Debtor 2
		Date 4/9/2018			Date
ı	Did you attach	additional pages t	o Your Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
	<b>✓</b> No				
	Yes				
ı	Did you pay or	agree to pay some	one who is not an at	torney to help you fill out	bankruptcy forms?
l	<b>✓</b> No				
i	Yes. Name	of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:					
Debtor 1	Bridgett	F	Hoskins		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.					
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?			
	Creditor's name: Santander Consumer USA  Description of property securing debt: 074 Automobile	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement.  ☐ Retain the property and [explain]:	No. ✓ Yes.			
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.			
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.			
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.			

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Debtor	Bridgett	F	Hoskins	Case number (	if
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Pers	onal Property Leases	S		
informa	unexpired personal property	lease that you listed in S tate leases. Unexpired l	Schedule G: Executory eases are leases that a	re still in effect; the le	ed Leases (Official Form 106G), fill in the ase period has not yet ended. You may
De	scribe your unexpired persona	I property leases			Will the lease be assumed?
Les	ssor's name:				☐ No ☐ Yes
	scription of leased operty:				
Les	ssor's name:				☐ No ☐ Yes
	scription of leased operty:				
Les	ssor's name:				☐ No ☐ Yes
	scription of leased operty:				
Les	ssor's name:				☐ No ☐ Yes
	scription of leased operty:				
Les	ssor's name:				☐ No ☐ Yes
	scription of leased operty:				
Les	ssor's name:				☐ No ☐ Yes
	scription of leased operty:				
Les	ssor's name:				☐ No ☐ Yes
	scription of leased operty:				_
Part 3:	Sign Below				
Und			y intention about any p	property of my estate th	nat secures a debt and any personal
, sp	,				
_	/s/ Bridgett Hoskins		*		
S	Signature of Debtor 1		Sigr	ature of Debtor 2	<del></del>
	Date 4/9/2018		Date	)	
	MM/DD/YYYY			MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

		Hortifolii	District of Illinois		
In re	Bridgett F Hoskins		Case	No	
	Debtor			·	(If known)
			Chapt	ter	Chapter 7
	DISCLOSURE OF	COMPENSA	ATION OF ATTORI	NEY FO	R DEBTOR
	Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one rendered or to be rendered on behal	e year before the filing	of the petition in bankruptcy, o	r agreed to be	e paid to me, for services
	For legal services, I have agreed to a	ccept			\$1,250.00
	Prior to the filing of this statement I	have received			\$0.00
	Balance Due				\$1,250.00
2.	The source of the compensation pai	d to me was:			
	Debtor	Other (s	specify)		
3.	The source of the compensation pai	d to me is:			
	<b>Debtor</b>	Other (s	specify)		
4.	I have not agreed to share the almembers and associates of my		ensation with any other person	unless they a	re
	I have agreed to share the above members or associates of my la the people sharing in the compe	w firm. A copy of the a			
5.	In return for the above-disclosed fee	e, I have agreed to reno	der legal service for all aspects o	of the bankrup	otcy case, including:
	<ul> <li>a. Analysis of the debtor's final bankruptcy;</li> </ul>	ncial situation, and rer	ndering advice to the debtor in o	determining w	hether to file a petition in
	b. Preparation and filing of any	petition, schedules, s	statements of affairs and plan w	hich may be r	equired;
	c. Representation of the debtor	at the meeting of cre	ditors and confirmation hearing	, and any adjo	ourned hearings thereof;
6.	By agreement with the debtor(s), the	above-disclosed fee	does not include the following s	services:	
		CE	RTIFICATION		
	certify that the foregoing is a comple or(s) in this bankruptcy proceedings.	te statement of any a	greement or arrangement for pag	yment to me f	for representation of the
	4/9/2018		/s/ Yisroel Y Mosl	kovits	
	Date		Signature of Atto		
			Semrad Law Fi	rm	
			Name of law fir	m	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Hoskins, Bridgett F	Case No.	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MAT	RIX
Th knowledge	ne above named Debtors hereby verify t e.	hat the attached list of creditors is tru	ue and correct to the best of their
Date:	4/9/2018	/s/ Hoskins, Bridg Hoskins, Bridgett <i>Signature of Deb</i>	t F

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

NORDSTROM/TD BANK USA PO BOX 6555 ENGLEWOOD, CO, 80155

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

MERRICK BANK CORP One Paces West Suite 1400 Atlanta, GA, 30339

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL, 32256

COMENITYBANK/MARATHON PO BOX 182789 COLUMBUS, OH, 43218

COMENITYBANK/NY&CO 220 W SCHROCK RD WESTERVILLE, OH, 43081

CCS/FIRST NATIONAL BAN 500 E 60TH ST N SIOUX FALLS, SD, 57104

KOHLS/CAPONE PO BOX 3115 MILWAUKEE, WI, 53201

COMENITYCB/HSN 995 W 122ND AVE WESTMINSTER, CO, 80234 CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV, 89193

TD BANK USA/TARGETCRED PO Box 660170 Dallas, TX, 75266

CREDIT FIRST N A 6275 EASTLAND RD BROOKPARK, OH, 44142

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

SYNCB/TJX COS PO BOX 965005 ORLANDO, FL, 32896

SYNCB/CARE CREDIT 950 FORRER BLVD KETTERING, OH, 45420

Westwood College 7400 E. Arapahoe Rd. Suite 10 Englewood, CO, 80112

Citibank PO BOX 6241 Sioux Falls, SD, 57117

FEB-RETAIL 3175 Commercial Ave Ste 201 Northbrook, IL, 60062

Chase Bank Po Box 659732 San Antonio, TX, 78265

Illinois Department of Unemployment 4519 W Main St Belleville, IL, 62226 TD BANK USA 33 N Dearborn #1301 Chicago, IL, 60602

ERC P.O. BOX 57610 Jacksonville, FL, 32241

TMobile P.O. Box 742596 Cincinnati, OH, 45274

Brightwater Capital LLC 850 Concourse Parkway South Suite 120 Maitland, FL, 32751

Bankcard Service PO Box 4477 Beaverton, OR, 97076

AFNI Po Box 3517 Bloomington, IL, 61702

Comcast 1255 W. North Ave Chicago, IL, 60622

FIFTH THIRD BANK PO Box 9013 Addison, TX, 75001

Nicor Gas Po Box 549 Aurora, IL, 60507

Westlake Hospital 1225 Lake Street Melrose Park, IL, 60160

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also un derstand that The Semrad Law Firm, LLC may incur costs for such it ems as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 1250.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$31.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Debtor Initials 2

the second retainer. Further, if I do not wish for The Semrad La w Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: April 9, 2018

Bridgett F Hoskins

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Debtor 1 Bridgett	F	Hoskins	Case number (if knowl	·			
First Name	Middle Name	Last Name					
Part 6: Answer These Questions for Reporting Purposes							
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid to	inter 7. Do vou estim					
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,00	10-5,000 11-10,000 101-25,000	25,001-50,000 50,001-100,000 More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10 \$50	00,001-\$10 million ,000,001-\$50 million ,000,001-\$100 million 0,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10 \$50	00,001-\$10 million ,000,001-\$50 million ,000,001-\$100 million 0,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below			t	the information provided is true and			
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
	Executed on 4/9/2018 Executed on MM / DD / YYYY						

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Debter 1	mation to identify your ca	ase:		
Debtor 1	Bridgett	F	Hoskins	
DCDIO! !	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number				
(If known)				Check if this is ar amended filing
Official	Form 106De	С		amended himg
			torio Sobodulas	12/15
			tor's Schedules	
If two married	people are filing togethe	er, both are equally respo	nsible for supplying correct in	formation.  g a false statement, concealing property, or obtaining  in 000, or imprisonment for up to 20 years, or both. 18
Part 1: Sign	1341, 1519, and 3571. Below			
			SII - A beaksur	toy forme?
Did you p	ay or agree to pay some	one who is NOT an attori	ney to help you fill out bankrup	atcy forms?
<b>☑</b> No	ay or agree to pay some  Name of person	one who is NOT an attori		ion Preparer's Notice, Declaration, and

MM/DD/YYYY

MM/DD/YYYY

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ehtor 1	Bridgett	F		Hoskins	Case number (if known)
	First Name		Middle Name	Last Name	
8. Wil	thin 2 years before yeditors, or other part	ou filed for b	oankruptcy, did yo	ou give a financial state	ment to anyone about your business? Include all financial institutions
	No Yes. Fill in the deta	ils below.			
				Date issued	
	Name			MM/DD/YYYY	_
	Number Street			_	
	City	State	Zip Code	-	
Part 12:	Sign Below				
	and correct. I under nkruptcy case can re	rstand that nesult in fines  radgett Hoskii re of Debtor 1	naking a false sta s up to \$250,000, ns Dulque	Maskurs	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date
			_		iniduals Filing for Bankruptov (Official Form 107)?
Did y	ou attach additiona	I pages to Y	our Statement of	Financial Affairs for Indi	ividuals Filing for Bankruptcy (Official Form 107)?
Ø,	<b>rou attach additiona</b> No Yes	il pages to Y	our Statement of	Financial Affairs for Indi	ividuals Filing for Bankruptcy (Official Form 107)?
	No Yes			Financial Affairs for Indi	

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#### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Hoskins, Bridgett F  Debtor(s)	Case No	
	2000(4)	Chapter.	Chapter7
	VERI	FICATION OF CREDITOR MAT	RIX
Th knowledge		erify that the attached list of creditors is tr	ue and correct to the best of their
Date:	4/9/2018	/s/ Hoskins, Bridget Hoskins, Bridget Signature of Deb	t F

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Debtor 1 Bridgett	F	Hoskins	Case number (if know	wn)	
First Name	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Unemployment compensat     Do not enter the amount if younder the Social Security Act.     For you	ou contend that the amount i	received was a benefit	\$ <u>0.00</u>		
For your spouse	)	\$0.00			
9.Pension or retirement inco benefit under the Social Secu	rity Act.		\$ <u>0.00</u>		
10.Income from all other sou amount. Do not include any payments received as a victim international or domestic terro page and put the total below	benefits received under the Sin of a war crime, a crime again orism. If necessary, list other is	ocial Security Act of nst humanity, or			
Other Government Assistance	e		\$ <u>197.00</u>		
Total amounts from separate	pages, if any.		+\$350.00		
11. Calculate your total curre		nes 2 through 10 for	\$547. <u>00</u>	.	\$547.00
anch	I for Column A to the total fo				Total current
					monthly income
12. Calculate your current mo	er the Means Test Appli enthly income for the year.	Follow these steps:	Con	/ line 11 here →	\$547.00
12a. Copy your total current		· · · · · · · · · · · · · · · · · · ·	January Copy	y mile 17 Holo y	X 12
Multiply by 12 (the num 12b. The result is your annua	nber of months in a year). al income for this part of the f	orm.		12	\$6,564.00
13 Calculate the median fami	ly income that applies to y	ou. Follow these steps:			
Fill in the state in which you I		Illinois			
Fill in the number of people in	n your household.	2			
Fill in the median family incor household.		gasanangan makabangan nanamban nahakaban m	www.commencenter.commencenter.	13	\$68,687.00
To find a list of applicable me instructions for this form. Thi  14. How do the lines compare	s list may also be avallable at	nline using the link specified the bankruptcy clerk's office	I in the separate e.		
		top of page 1, check box 1	, There is no presumption of	abuse.	
14b. Line 12b is more th Go to Part 3 and fil	nan line 13. On the top of pag I out Form 122A-2.	ge 1, check box 2, The pres	sumption of abuse is determin	ned by Form 122A-2.	
Part 3: Sign Below	1000				
By signing here, I declare ur	nder penalty of perjusy that th	e information on this staten	nent and in any attachments i	is true and correct.	
/s/ Bridgett Hoskins Signature of Debtor 1	Budget No	h × s	ignature of Debtor 2		
Date 4/9/2018 MM/DD/YYYY	,		MM/DD/YYYY		
If you checked line 14a, d	lo NOT fill out or file Form 12 ill out Form 122A-2 and file it	2A-2. with this form.			